PÁTENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/043862

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			25				Г	RATE	FEE	1	RATE	FEE
FOR 01/09/02			NUMBER FILED		NUMB	ER EXTRA	E	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		. 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			4 minus 3 = *		1			X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL		OR	TOTAL	914
CLAIMS AS AMENDED - PART II (Column 2) (Column 3)								SMALL ENTITY (OTHER THAN SMALL ENTITY	
Н	8/10/02	(Column 1) CLAIMS		(Colu	mn 2) (EST	(Column 3)	Г	SMALL		OR	SWIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 25	Minus	** 2	<u>-</u> 5	= O		X\$ 9=		OR	X\$18=	
	Independent	* 4 NTATION OF MI	Minus	***	T CLAIM	= 8		X42=		OR	X84=	
	FINOT FRESE	INATION OF IM	JEIII CE DEI	LITOLIT	, op an			+140=.		OR	+280=	
								TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	0
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		-	l	X42=		OR	X84=	•
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	厅	X42=		OR	X84=	
_ا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er foun	d in the app	propriate box	c in co	lumn 1.	